

Jordan FETP

Background and Goals

The Jordan Project, based in Amman, began in November 1998 with funding from the USAID-Jordan Mission. The project went through three phases and the name changed with each phase to reflect the expanding scope of the work.

Phase I: Jordan Data for Decision Making Project

Phase I (November 1998–October 2001) focused on improving the use of data at all levels of the Jordan Ministry of Health (MOH). Two main applied public health training programs were started: the Field Epidemiology Training Program (FETP) and the Data for Decision Making (DDM) project. Efforts to improve the collection, analysis, and response to surveillance data were also initiated.

The FETP is a 2-year in-service training program in applied epidemiology. It prepares field epidemiology trainees for leadership positions in various levels of the MOH. The program involves 25% classroom instruction and 75% field assignments. Trainees take courses in epidemiology,



communications, economics, and management. In addition, they work in the field where they conduct epidemiologic investigations and field surveys, evaluate surveillance systems, perform disease control and prevention measures, report their findings to policy- and decision-makers, and train other health workers.

The DDM project seeks to increase the effective use of data in setting health priorities and policies, as well as making cost-effective decisions concerning the allocation of resources. DDM also focuses on planning, implementing, monitoring, and evaluating health programs.

Phase II: Jordan Surveillance Project

Phase II (November 2001–September 2004) represented a widened scope of work in response to MOH needs and priorities. The Jordan Surveillance Project continued to build capacity for the MOH through FETP and DDM activities and to strengthen the communicable disease surveillance system.

Mortality surveillance and the Behavioral Risk Factors Surveillance System (BRFSS) were initiated to provide data on the main causes of death and to measure the behavioral risk factors that contribute to non-communicable diseases.

Phase III: Jordan Applied Epidemiology Project

Phase III (October 2004–current) focuses on strengthening the surveillance of communicable and non-communicable diseases, including mortality surveillance and BRFSS. FETP and DDM continue

to represent strategies to improve human capacity in the MOH. FETP graduates support the projects and priority efforts of the MOH to strengthen existing systems and develop new ones. In 2007, the Jordan Applied Epidemiology Project focused on institutionalizing its functions in order to become fully sustained by the MOH. The FETP has also provided training to medical epidemiologists from Iraq and from Yemen.

Funding and Partnerships

- Centers for Disease Control and Prevention's National Center for Chronic Disease Prevention and Health Promotion; National Center for Health Statistics
- Jordan MOH
- USAID-Jordan Mission
- World Health Organization Jordan and Iraq Offices



Program Accomplishments

The program is improving the country's public health system through various projects listed below.

Human Capacity Building, Applied Epidemiology Training

- FETP and DDM work together to strengthen and improve human capacity at the MOH and to establish a culture of using data to direct programs and policies
- FETP graduates hold key positions at central and local levels of the public health system

Systems Strengthening and Development, Outbreak Investigations, Infectious Disease Surveillance

- Trainees detect, investigate, act upon outbreaks, and perform surveillance system evaluations
- The electronic Jordan Infectious Disease Information System was developed and installed at local and central level directorates who use it to report diseases weekly to the Directorate of Infectious Diseases
- Five sentinel sites were established to estimate the burden of foodborne diseases in Jordan
- A weekly notifiable communicable disease report and other information were developed and posted at www.dcd.gov.jo
- DDM is used to train personnel and establish a hospital infection control surveillance system

BRFSS

- Surveillance is conducted on risk factors for chronic diseases, particularly those related to cardiovascular diseases, diabetes, and stroke
- BRFSS is institutionalized and three national surveys have been conducted (2002, 2004, and 2007)

Mortality Surveillance

- Forms and mechanisms to report deaths were modified to comply with international standards
- Cause of death data are coded and entered into a database at the Information Directorate; mortality data are analyzed annually
- Mortality surveillance is institutionalized at the Directorate of Research and Information
- A graduate of the FETP heads the Mortality Surveillance Unit

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